

WYOMING BUSINESS TOOLKIT



A Guide to
Establishing a

Tobacco-Free Workplace



TOBACCOFREE WYOMING



Produced by Wyoming Through With Chew,
in cooperation with the Wyoming Department of Health, Substance Abuse Division





“**E**very day we ask Wyoming residents to ‘commit to your health’ with our department’s slogan. We are also asking Wyoming’s employers to help both their workers and their own financial picture by adopting worksite wellness programs.”

—Dr. Sherard, Director,

Wyoming Department of Health

(For more information on Wyoming Worksite Wellness Programs, go to:

<http://wdh.state.wy.us/main/index.asp>)



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TOBACCOFREEWYOMING

Brent D. Sherard, M.D., M.P.H., Director and State Health Officer

Governor Dave Freudenthal

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Dear Wyoming Employer:

It is with pleasure that I introduce to you the first ever *Wyoming Business Toolkit: A Guide to Establishing a Tobacco-Free Workplace*. Businesses play a large role in the health and well-being of employees and I am confident you will find, herein, the information you need to make an important, life-saving decision for your employees—providing a tobacco-free workplace.

Tobacco use is a health hazard. The Centers for Disease Control and Prevention report over 440,000 tobacco deaths per year in the United States. It is much less expensive to help tobacco users quit than to spend millions of dollars on related healthcare costs. This toolkit contains helpful information about the importance of a tobacco-free workplace, steps needed to become tobacco-free, and cessation resources available to your business and employees.

Businesses save money by providing a tobacco-free workplace and encouraging tobacco cessation. In Wyoming, the legislature has allocated funds for free cessation services for Wyoming residents, designed to help any Wyoming resident quit tobacco. For tobacco users, the combination of employer cessation support and a tobacco-free workplace could be exactly what they need to finally break free of their addiction. According to the U.S. Surgeon General, implementing a tobacco-free workplace policy is one of the best ways to help tobacco users quit. Tobacco-free workplace policies "have been shown to decrease daily tobacco consumption and to increase smoking cessation among smokers."¹ Making your workplace tobacco free is a highly effective way to both help smokers and chewers cut down or quit their tobacco use and decrease your health insurance costs at the same time.

In this toolkit, you will find examples of other Wyoming businesses benefiting from their decision to provide a tobacco-free workplace and cessation for their employees—businesses such as the Iron Creek Energy Group, LLC; Arch Coal (Thunder Basin); and RT Communications. By working together on this issue, we can make a difference in the overall health of our communities, save money in healthcare costs, and create a healthy legacy for future generations.

Thank you and I look forward to working with you.

Sincerely,



Brent D. Sherard, M.D., M.P.H., Director
and State Health Officer
Wyoming Department of Health

BDS/SB/jg

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According to Worksite Wellness, WY Best Practices, 2006, "By systematically addressing the issues surrounding employee wellness, an organization can realize long-term benefits to the real health of individual workers and wellness and to its own economic costs." ²

To find out you can help your workplace
SAVE MONEY,

please read on

To find out how you can make your workplace
**SAFER
CLEANER
HEALTHIER
AND MORE PRODUCTIVE,**

please read on

SAVING MONEY FOR YOUR BUSINESS

Tobacco use costs employers production time:

- An average smoker takes six cigarette breaks a day.
- Each smoke break takes 10 minutes.
- 6 smoke breaks x 10 minutes = 60 minutes a day
- 60 minutes a day x 5 days a week = 5 hours per week
- 5 hours per week = 3 days per month or over 30 days a year in lost productivity

Cigarette smoking costs Wyoming \$125 million per year in medical costs, plus an additional \$140 million per year in lost productivity.³

Businesses today are constantly looking for ways to reduce costs. Over the past couple of decades, research and experience has demonstrated that employee tobacco use directly affects the bottom line. Smokers cost Wyoming employers:

\$1,968 in lost productivity

+

\$1,965 in excess medical expenditures per year

\$3,996 cost to employer for every employee who smokes⁴

(See cost sheet on page 6 to determine what smoking is costing your company)

Second-hand smoke exposure racks up an additional \$490 per year in medical and loss productivity costs per smoker.⁵

Lost **production time** for workers who reported smoking one pack of cigarettes per day or more was estimated to be 75% higher than nonsmokers and ex-smokers.⁶

Spit tobacco users learn and adjust to new tasks at a **slower rate** than non-tobacco users. During a visual-motor task, smokeless tobacco users exhibited slower learning and adjustment to new requirements, more jerks, slower and more irregular movements, and less accurate overall performance compared to non-spit users.⁷

Tobacco users get **sick more often** and take longer to recover from their illnesses. Smokers have more hospital admissions than non-smokers, stay in the hospital longer, and make six more visits to health care facilities per year than nonsmoking employees.⁸

Smokers are **absent from work** at least 50% more than nonsmokers. Smokers, on average, miss 6.16 days of work per year due to sickness (including smoking-related acute and chronic conditions), compared to nonsmokers, who miss 3.86 days of work per year.⁹ Costs for these absences include temporary replacements and lower productivity and morale among employees who are on the job and must cope with the absences.

Spit tobacco use can cause **increased visits** to the dentist for oral care, poor gastric-digestive health, and associated cancer costs along with potential long-term health care expenses.

Insurance Costs

Dozens of companies offer discounts on life, disability, and medical insurance for non-tobacco users. As a cost-saving strategy, it is worth investigating the reduction of insurance costs for tobacco-free workplaces.

Employers and employees alike are concerned about the rise in healthcare costs. The American Cancer Society reports that employees who smoke have an average insured payment for health care of \$1,145, while nonsmoking employees average \$762.26. Smoking employees cost every company an average of \$1,429 per smoker per year in increased healthcare costs over nonsmoking employees.

Not only will health insurance costs go down (tobacco users have 15% higher disability rates than non-smokers) but so will life insurance costs and claims and disability costs and claims.¹⁰

On average, tobacco users can cost company drug plans at least twice as much as non-tobacco users.¹¹

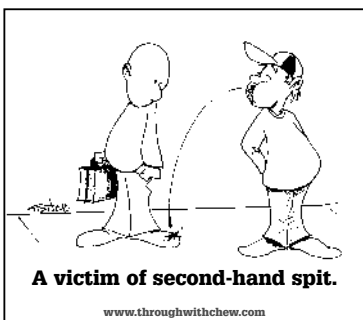
Property Damage Costs

Cleaning and maintenance made necessary by tobacco smoke and spit tobacco-related litter cost businesses about \$4+ billion per year nationwide. Tobacco-free workplaces have lower cleaning maintenance, ventilation and refurbishment costs. The need to repaint ceilings, walls, and replacing window coverings yellowed by tobacco smoke is eliminated.¹²

The total property and contract losses due to fires caused by smoking materials in non-home structures was approximately \$153 million between 1999 and 2002, according to the National Fire Protection Association.¹³

On May 25, 2006, a fire caused by smoking severely damaged the Silver Dollar Bar in Cody, Wyoming, and the neighboring Edward Jones Investment office. In Gillette, a cigarette started a fire on the outside of Godfather's Pizza, costing owner Dave Hays time and money to repair the outside of his restaurant.

Smokefree businesses commonly see fire insurance costs reduced by 25 to 30%.¹⁴



Spit tobacco can also cause damage to property when spit users carelessly discard their biological waste on floors, in bathroom sinks, in water fountains or "miss" the trash receptacle.



“By getting all of your tobacco users on your group insurance to quit, your company could lower its insurance premiums by up to 40%.”

—John Stoll, over 25 years' experience, Registered Representative and Certified Senior Advisor, NBS Associates, Laramie WY

How Much Does Smoking Cost You?

In Wyoming, smoking costs an estimated \$3,996 per smoker per year. This cost is made up of \$1,965 in direct medical expenditures and \$1,968 in lost productivity. Factors considered in estimating these costs include:

- Greater health care costs
- Increased absenteeism
- Work time spent on smoking rituals
- Higher life insurance premium costs
- Greater risk of occupational injuries
- Costlier disability
- More disciplinary actions

Do the Math:

<hr/> Total Number of Employees	X	21.3% (2005 Wyoming Adult Smoking Rate)	=	<hr/> Number of Smokers (or, if known, enter the number of employees who smoke)
<hr/> Number of Smokers	X	\$1,965 (Estimated Health Costs)	=	<hr/> Total Health Costs
<hr/> Number of Smokers	X	\$1,968 (Estimated Productivity Cost)	=	<hr/> Total Productivity Costs
<hr/> Total Health Costs	+	<hr/> Total Productivity Costs	=	<hr/> Total Cost Per Year

Cost Worksheet adapted from North Dakota Department of Health, *Make It Your Business, Employer's Toolkit*
Source: BRFSS (2005), US Census (2005), and SAMMEC (1998 & 2001)

TOBACCO'S NEGATIVE EFFECTS ON WYOMING'S WORKFORCE

It is no secret – tobacco use has been implicated in cancers of the lungs, mouth, throat, larynx, esophagus, stomach, pancreas, uterus, cervix, kidney, bladder, and some forms of leukemia. Tobacco use causes cardiovascular disease, heart attack, fatal heart failure, stroke, pulmonary diseases, such as sinusitis, bronchitis, pneumonia, emphysema, and tracheitis (inflammation of the trachea).

Spit (Smokeless) Tobacco

The use of smokeless tobacco products is undergoing an alarming resurgence in the United States. Several national surveys have reported a higher prevalence of use among those employed in blue-collar occupations.¹⁵

Smokeless tobacco contains 28 cancer-causing agents (carcinogens). It is a known cause of human cancer as it increases the risk of developing cancer of the oral cavity. Oral health problems strongly associated with smokeless tobacco use are leukoplakia (a lesion of the soft tissue that consists of a white patch or plaque that cannot be scraped off) and recession of the gums.¹⁶

The health of employees is compromised when biological waste (spit tobacco mixed with mucous and saliva) is disposed of in an unsanitary fashion (such as spitting into a cup).

Wyoming adult males use spit tobacco at a rate that is double national average, with 14.8 percent chewing.¹⁷

Smokeless tobacco users are up to 50 times more likely to get oral cancer than nonusers.¹⁸ One in three patients diagnosed with oral cancer dies from it.¹⁹

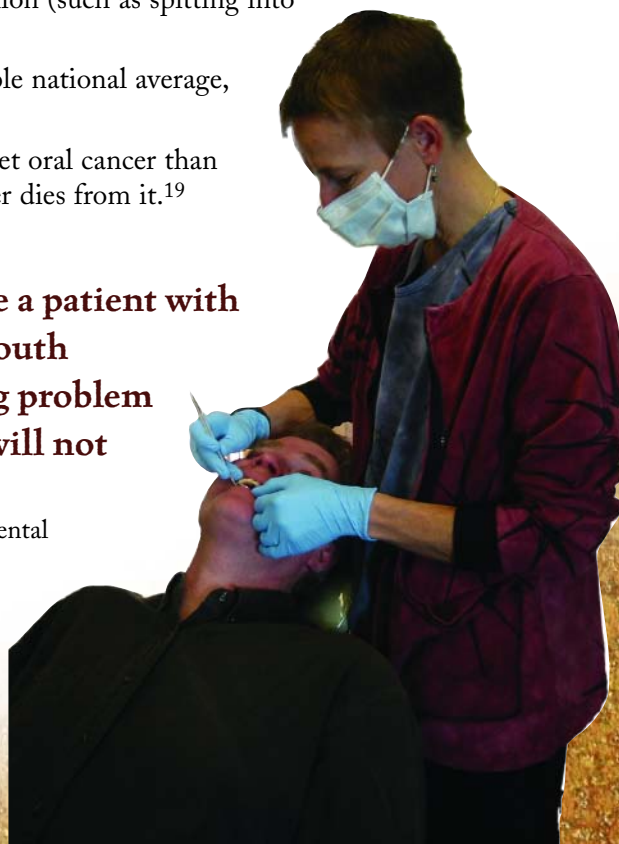
“Not a week goes by that I don’t see a patient with pre-cancerous tissue in their mouth caused by spit tobacco. It is a big problem in Wyoming. Eliminating the use of chew will not only save teeth, it will save lives.”

—Dr. Robert Tyrrell, Immediate Past President, Wyoming Dental Association, Kemmerer

64.2 percent of Wyoming worksites allow tobacco use outdoors, but not indoors.

10.8 percent of worksites have no rules about smoking at all.

45.3 percent have no rules about spit tobacco use.



“Those in blue-collar and service jobs—such as craft workers, laborers, and restaurant workers—are more likely to be exposed to secondhand smoke. They will also be less successful in giving up smoking than their white-collar counterparts.”

—Organized Labor & Tobacco Control Network



Smoking

Smoking is the number one cause of preventable death in Wyoming, killing more than 700 people each year, a number which is higher than all the deaths in Wyoming combined from car crashes, murders, and suicides.²⁰

Smokers have a 22 times higher risk of dying from lung cancer than men who do not smoke, and about 12 times higher among women who smoke cigarettes compared with those who have never smoked.²¹

Smokers are 2-4 times more likely to develop coronary heart disease than non-smokers and smoking nearly doubles a person's risk for a stroke.²²

Secondhand Smoke

According to the Surgeon General, there is no safe level of secondhand smoke. Even short-term exposure to second hand smoke can cause blood platelets to become stickier, damage the lining of blood vessels, decrease coronary flow velocity reserves, and reduce heart rate variability, potentially increasing the risk of heart attack.²³

Exposure to secondhand smoke causes some of the same serious illnesses as active smoking does: cancer, emphysema, heart attacks and strokes. In fact, constant exposure to secondhand smoke in the workplace nearly doubles the risk of having a heart attack. People exposed to smoke in the workplace are 17 percent more likely to develop lung cancer than those who are not exposed.²⁴

Between 60 and 120 people die every year from exposure to secondhand smoke in Wyoming.²⁵

THESE WYOMING BUSINESSES WENT TOBACCO-FREE, AND SO CAN YOURS!

“In 2006, RT Communications took the final step to becoming completely tobacco-free (smoking and chewing) in all buildings, vehicles and equipment owned, leased, or rented by RT Communications. It was a gradual process to get to this point, but it just made sense for us to do it. We want to promote a healthy work environment for all our employees. We even had two employees quit chewing all together since implementing a tobacco-free workplace. That alone was worth the policy change.”

—**Becky Dooley, VP/General Manager, RT Communications**



“We first introduced the Wyoming Quit Program to our employees during our annual safety training in January, 2003. In October, 2005, we modified our company’s Tobacco Policy at the same time we implemented a tobacco cessation program for employees and spouses. Our goal was to make quitting tobacco convenient and cost effective for our employees. Having on-site cessation services for our employees really seemed to make the difference. During the past year, 80 employees have enrolled in our tobacco cessation program.”

—**Rita Rushing, Human Resources Manager, Arch Coal/Thunder Basin**



“We care about the health of our employees and our insurance costs. That’s why we decided to go 100% tobacco-free in November, 2006. Not only are our employees not allowed to smoke or chew in our buildings, but they aren’t allowed to smoke or chew in company vehicles either. I have even offered my few remaining employees who use tobacco financial incentives to quit. Bottom-line, it’s an opportunity to do the right thing for all our employees.”

—**Tom Fitzsimmons, Operating Manager, Iron Creek Energy Group, LLC**

“In speaking with the physicians at our hospital, we realized how much tobacco use costs in medical expenses, so we decided not only to go smoke free on July 4, 2006, but also to give a 20% insurance premium discount to those employees and their families who do not use tobacco. We hope to encourage a healthier workforce.”

—**Rod Barton, CEO, Powell Valley Healthcare**

“Union Pacific values the health of each of its employees and the impact of health on our business objectives, so creating a smoke-free environment was a logical step in furthering our Health Management strategy.”

—**Marcy Zauha, Director, Health and Safety, Union Pacific Railroad**



GETTING STARTED: HOW TO BECOME A TOBACCO-FREE BUSINESS

After your organization has committed to the health of your employees by providing a tobacco-free workplace, here are some recommended steps you can follow to implement your tobacco-free policy:

1. Planning Phase

During this initial phase, you will want to gather as much information as possible related to your existing tobacco policy, other organizations' successful tobacco-free policies and effects of tobacco on your workplace—all included in this toolkit.



2. Legal Issues

There is nothing in Wyoming's policy that prevents businesses to voluntarily go tobacco-free. In fact, Wyoming has no smokefree law, only a policy, applying exclusively to government buildings; workplaces, restaurants, and bars are not addressed (Wyoming State Govt. Non-Smoking Policy (1989)). Additionally, there is no constitutional right to use tobacco, so it would not be an infringement on personal rights and liberties to prohibit tobacco in the workplace. If a company is planning on adopting a tobacco-free employee policy, some states do have laws in place that consider this to be discriminatory. Wyoming does have a law called Smoker Protection Law (Wyoming 1992 WYO. STAT. ANN. §§ 27-9-101 et seq.) Your company can still go tobacco-free, but it simply cannot institute a policy stating that only non tobacco users will be hired. (Information provided from Americans For Non-Smokers Rights).

3. Develop a Task Force or a Committee

After you have gathered all pertinent information (and shared it with any other decision makers in your organization), announce your organizations commitment to create a tobacco-free environment as a measure of health and dedication to employees.

From here, you may want to put together a committee of employees and decision makers. It is important to include tobacco users (smokers and chewers) on your committee; the committee could be assigned to assist in the implementation of the policy. Be sure there is an assigned leader to the group (ex: human resource officer, employee relations advisor, manager, etc.) who is already on-board with the policy change.

Build top management support and “buy in” for tobacco-free policy. Throughout the process, the environment should be supportive and have a strong process for communication.

4. Decide on New Policy and Plan for Implementation

From here, the group will need to develop a timetable and set a specific date to become a tobacco-free workplace. Some organizations find it useful to choose a nationally recognized day such as World No Tobacco Day, held annually on May 31. Allow your employees and company six months to prepare between announcing the policy change and implementing the new policy. Develop and offer employee incentives and rewards to go tobacco-free.

5. Draft the Policy

There are two levels of tobacco-free policies.

- 1) A tobacco-free campus, which includes the building(s), vehicles and grounds.
- 2) A tobacco-free building with designated outdoor tobacco use areas, located away from the entrances, vents and windows.

Any level of policy should include both spit tobacco and cigarette use.

Before deciding on which kind of policy, consider:

Polling employees to see how they feel (a sample is included in the *Resources* section)

Discussing options with task force working on issue

Calling your health insurance company to see how a change in policy might affect your business's insurance costs

Obviously only you know what is best for your company, but the Wyoming Department of Health recommends a 100% tobacco-free campus to fully protect the health and well-being of smokers, non-smokers, and spit tobacco users.

Sample Tobacco-Free Business Policy

Due to the acknowledged hazards of tobacco use and secondhand smoke, as of July 31, 2007, it shall be our policy to provide a tobacco-free environment for all employees and visitors. This policy covers any tobacco product (including, but not limited to, cigarettes, cigars, pipes and smokeless tobacco) and applies to both employees of and non-employee visitors to our company.

Definition

1. Tobacco use will be strictly prohibited within company buildings, including offices, hallways, waiting rooms, restrooms, lunchrooms, elevators, meeting rooms and all community work areas. This policy applies to all employees, contractors and visitors.
2. There will be no tobacco use in any company vehicle at any time.
3. Tobacco use shall be permitted only at a reasonable distance (e.g. 50 to 100 feet or more) outside any enclosed area to ensure that secondhand smoke does not enter the area through entrances, windows, ventilation systems or any other means.
4. Supervisors will discuss the issue of tobacco breaks with their staff. They will develop effective solutions that do not interfere with the productivity of staff.

Procedure

1. This policy is being announced six months in advance in order to facilitate a smooth transition.
2. Employees will be informed about this policy through the policy manual, orientation and training, and signs posted at our facilities and in our vehicles.
3. Visitors will be informed about this policy through signs and it will be explained by their host.
4. Our company will assist employees who wish to quit using tobacco by facilitating access to recommended tobacco cessation programs and/or materials.
5. Any violations of this policy will be handled through standard disciplinary procedures.
6. If employees have questions, they can contact our human resources representative.

6. Announce Tobacco-Free Policy

Announce the policy and implementation plan to all employees through appropriate communication channels. It is a good idea to communicate the change in various ways—employee newsletters, paycheck announcements, through managers, etc. Evaluate employee feedback and adjust the policy if needed. When the policy is finalized, print and post it in various places, highlighting the implementation date.

7. Education Phase

This phase is crucial and another place where your committee will be helpful.

Educate employees and patrons by:

- Including information about the policy in the company newsletter, paycheck inserts, all staff e-mails, bulletin boards, and employee meetings
- Display signs announcing the day you will become tobacco-free
- Place notices in present designated smoking areas to remind users of the upcoming change
- Send a news release to the local media—be prepared for an interview
- Use posters to help educate employees about the need to be tobacco-free. Include information about the cessation resources available through the State of Wyoming or local community
- Promote tobacco cessation resources (provided free by the State of Wyoming) for employees
- Provide in-service training to management and other key employees
- Provide information to employees about nicotine addiction and barriers to quitting. Never blame the tobacco users for their addiction. Keep the focus on the tobacco product.



8. Implement the Policy

When it is time to implement the policy, make changes to facilitate the tobacco-free environment. For example, install “No Tobacco” signs and remove ash receptacles.

On the designated day, go tobacco-free! Be sure you follow the guidelines for any policy your organization has and enforce the policy from day one.

9. After Policy Is Implemented

Just like any policy, it is important to evaluate and refine the policy from time to time. You can enhance this process by receiving feedback from employees and the public. This is especially helpful after the first two years the policy is in place. Meanwhile, be flexible and positive with all employees. This includes celebrating the policy, increasing positive publicity through a local tobacco prevention group, and creatively involving youth in the change. Support and recognize employees who quit tobacco, emphasizing how difficult nicotine is to quit. Last but not least, receive recognition from the State of Wyoming for your organization’s commitment to the Wyoming Tobacco-Free Workplace Standards.

10. Enforcement

Most companies report that once a comprehensive tobacco-free policy is in place, employees tend to do well with compliance. However, posting “No smoking or chewing” signs, while removing ashtrays and tobacco vending machines, will enforce the new policy. Consider appointing a top-management “point-person” who monitors the policy and can receive questions, concerns, or deal with infractions. Infractions should be handled with standard company disciplinary procedures. Remember that creating a supportive environment, where successes are continually recognized, is the best form of enforcement.

WYOMING'S CESSATION RESOURCES

Although all companies are highly encouraged to provide cessation benefits in healthcare packages, we are lucky that Wyoming provides free cessation counseling, and, in many cases, free medications to help users quit. It is known that people who seek cessation counseling increase their chances of quitting. The types of cessation medications available and recommendations for usage change frequently. Also, dosage and length of use varies according to how much the user smokes or chews. Counselors can make sure your employees who use tobacco are getting the appropriate help in order to successfully quit.

Wyoming Offers Two Free Resources to Quit Tobacco

- 1) Call 1-800-QUIT-NOW. This confidential phone call will put your employees in touch with a cessation counselor to help your employees quit. Not only is the cessation counseling free, but your employees can receive free or discounted nicotine replacement therapies (such as the patch, nicorette gum, anti-depressants, etc) depending on their income level.
- 2) Go to wy.quitnet.com for online help and counseling. This website also offers chat rooms where your employees can talk with other people trying to quit tobacco.



Offer Free Cessation Through Your Health Insurance Program

Cost-effectiveness analyses have shown that smoking cessation treatment compares favorably with hypertension treatment and other preventive interventions such as annual mammographies, pap tests, colon cancer screenings, and treatment of high levels of serum cholesterol.

“Paying for tobacco use cessation treatments is the single most cost-effective health insurance benefit that can be provided to employees.”

—Department of Health and Human Services, 2005 Centers for Disease Control And Prevention

Including treatment in your insurance plan can lead to:

- Lower prevalence of death and disease among policy holders.
- Lower claim volumes and severity of claims.
- More competitive health insurance premiums for employer.²⁶

Cost Savings

\$1,965 Cost of tobacco per employee in Wyoming (not including lost productivity)

- \$45 Cost per employee providing tobacco cessation in the workplace

\$1,920 Amount saved per smoking employee who quits.²⁷

Calculate Your Saving

Go to www.businesscaseroi.org/roi/default.aspx for a “Return on Investment” business calculator, where you can see how quickly you can save money by offering tobacco cessation and counseling to your employees.

REWARDING YOUR EMPLOYEES

Below are the various levels of success (Bronze, Silver, Gold) in developing a tobacco-free policy. Please contact Wyoming Through With Chew staff through the website (www.throughwithchew.com) in order to alert them of your attainment of Bronze, Silver or Gold! They will work with your local tobacco prevention advocates to issue a press release about your company's policy and send it with a photo to your local newspaper. Please contact Through With Chew online so that your business can be listed as tobacco-free on its website.

Bronze

Action

Establish a 100% comprehensive tobacco-free workplace, including campus and vehicles.

Silver

Action

Establish a 100% comprehensive tobacco-free workplace, including campus and vehicles.

Promote cessation throughout the company by advertising free quit services through Wyoming Quit Tobacco Program (1-800-QUIT-NOW) and wy.quitnet.com.

Provide incentives to employees for quitting tobacco use.

Gold

Action

Establish a 100% comprehensive tobacco-free workplace, including campus and vehicles.

Promote cessation throughout the company by advertising free quit services through Wyoming Quit Tobacco Program (1-800-QUIT-NOW) and wy.quitnet.com.

Provide incentives to employees for quitting tobacco use.

Do any of the following:

- Reduce insurance rates for non-tobacco users.

- Include family members in cessation programs.

- Provide discounts or employer-covered gym memberships.

- Provide rewards such as coupons or gift certificates for local businesses, or a company picnic/party/outing for all employees and families if all employees quit tobacco.

- Ensure that your health benefit plan includes coverage for cessation treatment and medications.

RESOURCES FOR YOUR BUSINESS TO HELP YOU GO TOBACCO-FREE

Use this survey to gather information about your employees' tobacco use and opinions about a tobacco-free workplace prior to enacting a policy.

Tobacco Policy Survey

Our company is in the beginning phases of assessing whether we should enact a tobacco-free workplace policy. We would like to get your important opinion about a possible policy, whether you use tobacco, whether you would consider quitting, and whether you would benefit from cessation services promoted or paid for by our company.

Do you currently use tobacco products? Yes No

If you answered "Yes," please circle the products that you use:

cigarettes spit/chew tobacco cigars pipes other _____

If you answered "No," please skip to question 7.

1. How long have you smoked or used spit tobacco or other tobacco products?
2. Do you smoke or use spit tobacco while at work? Yes No
3. Have you previously quit or tried to quit? Yes No
4. What type of things have you tried in your attempts to quit tobacco?
 - ☐ Nicotine gum, patch or lozenges
 - ☐ Zyban, Bupropion, Chantix or Wellbutrin
 - ☐ Sunflower seeds, nuts, gum, or candy
 - ☐ Hypnosis
 - ☐ Formal Cessation program/group/class
 - ☐ Telephone or computer support
 - ☐ Other (Please describe)
5. Would you or your family members be interested in tobacco cessation assistance?
Yes No
6. If tobacco were banned in the workplace, how would this affect the amount you currently use?
 - ☐ It would not affect it
 - ☐ I would use less
 - ☐ I would use more at home
 - ☐ I would try to quit
7. What would help you the most to quit?
 - ☐ company-provided incentives
 - ☐ reduction in insurance
 - ☐ time off to attend cessation classes
 - ☐ inclusion of family
 - ☐ cessation services at work site
 - ☐ health screenings on site
 - ☐ having a tobacco-free workplace

8. Should the company offer smoking cessation programs? Yes No

If yes, who should pay for these programs?

Comments: _____

9. How important do you think it is to provide a 100% tobacco-free workplace? Please circle one:

Not very important Somewhat important Extremely important

10. I believe tobacco use impacts my employer's health care costs, employee absences, employees' morale, employees' job performance. Agree Disagree

11. Would you like to serve on the committee to plan to become tobacco-free and to plan to implement the policy? Yes No

(Provide your name if you would like to serve on the committee.)

Name: _____

12. Do you support the transition to a totally tobacco-free workplace? Yes No

Comments: _____

Do you believe the company grounds should be entirely tobacco-free? Check the ones you agree with below.

- ☐ The building should be entirely tobacco-free
☐ An outdoor area should be provided for smokers and chewers
☐ No smoking or chewing should be allowed in company vehicles

13. Please indicate the extent to which you are bothered by secondhand smoke at work.

- ☐ Frequently bothered
☐ Occasionally bothered
☐ Seldom bothered
☐ Never bothered

14. If you are bothered by secondhand smoke at work, in what way are you bothered? (check all that apply)

- ☐ Eye, nose and throat irritation
☐ Concern for my long-term health
☐ Interference with work performances
☐ Headaches
☐ Pregnancy-related concerns
☐ Other, please specify _____

15. Please indicate the extent to which you are bothered by spit tobacco use at work.

- ☐ Frequently bothered
☐ Occasionally bothered
☐ Seldom bothered
☐ Never bothered

16. If you are bothered by spit tobacco use at work, in what way are you bothered

- ☐ Dirty; biological waste in work area
☐ Concern for long-term healthcare costs
☐ Interference with work performances
☐ Company image of tobacco tolerance
☐ Other, please specify _____

INSURANCE CALCULATION TOOL

Calculate your Company's Liability due to Tobacco²⁸

Below is a partial list of diagnoses caused by or made worse by tobacco use. Some health plan reports contain this information, or you can contact your health insurance company to have a special report generated. Benefit and human resource managers can use this list to help determine what your company spends on tobacco use. This tool can also be used later to help determine the effectiveness of employees quitting or new policies implemented. (This list is not complete; there are numerous other kinds of illnesses associated with tobacco use, e.g., hip fractures, numerous types of cancer, dental work and periodontal disease.)

Conditions	ICD-9 Diagnosis Codes	Number of Claims	Estimated % Tobacco Related	Cost per Diagnosis	Cost to Your Company
Asthma	493.00				
Carcinoma, In situ, bronchus and lung	231.2				
Chest pain	491.2				
Chronic airway obstruction	496.00				
Chronic Obstructive Pulmonary Disease	491.2				
Cough	786.2				
Diabetes Mellitus	250.0				
Dysplasia, lung	748.5				
Emphysema, obstructive	492.8				
Hypercholesterolemia	272.0				
Infection, upper airway	465.9				
Metaplasia, tracheo-bronchial tree	519.1				
Reduced vital capacity	794.2				
Acute myocardial infarction	410.0				
Coronary atherosclerosis	414.0				
Leukoplakia	5286				

WYOMING BUSINESSES THAT HAVE TOBACCO-FREE POLICIES

Hundreds of other businesses in Wyoming have gone tobacco-free.

Below is a small listing that you may use as a resource while forming your policy.

Tobacco-Free Businesses

CROWN Beverage Packaging, Plant #2

Worland, 620 N. 4th Street
Worland, WY 82401
(307) 347-8271

Iron Creek Energy

Tom Fitzsimmons
P.O. Box 2850
Cody, Wyoming 82414
(307) 587-7232

RT Communications

130 S. 9th St.
Worland, WY 82401
(307) 347-7000

Wyoming Department of Corrections

Donna Sheen, Administrator, Support Services
700 W. 21st Street
Cheyenne, WY 82002
307-777-7208

Smokefree Businesses

Arch Coal-Thunder Basin

Rita Rushing/Human Resources
P.O. Box 406
Wright, WY 82732
(307) 939-1300

Powell Valley Healthcare

777 Avenue H
Powell, WY 82435
(307) 754-2267

Union Pacific Railroad

(881 miles of tracks in Wyoming, with field offices
in Cheyenne, Rawlins and Green River)
1400 Douglas Street
Omaha, NE 68179
(402) 544-5000

“Going tobacco-free was the right thing to do, and we have seen the benefits in a safer, healthier and more productive environment.

Over 1,000 inmates and staff have participated in the quit tobacco program. A number of them have thanked us for helping them become tobacco free, and we are proud that we could do so.”

—Bob Lampert, Director
Wyoming Department of
Corrections

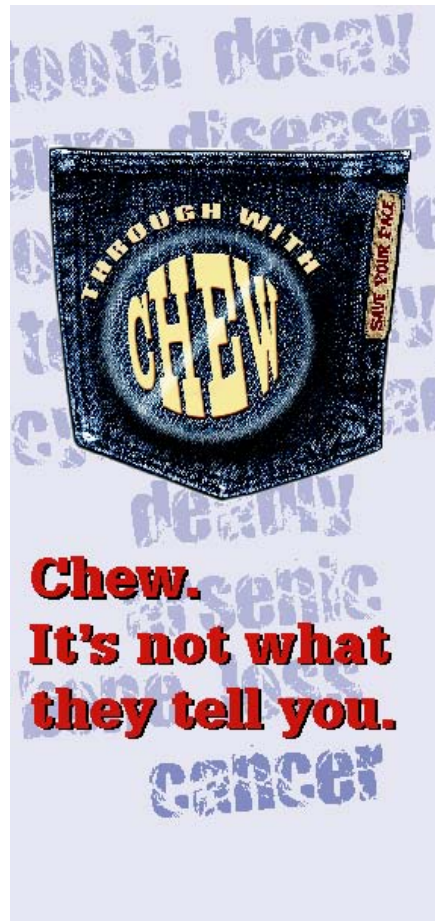


Mike Buchanan, wild horse program supervisor at the Wyoming Honor Farm (a program of the Wyoming Department of Corrections), talks to tobacco cessation coordinators Rosi Davidson, left, and Elizabeth Robison, right.

PRINTED RESOURCES

There are numerous printed resources available to help you and your employees. Some samples are shown below. To get copies of them, please contact your local county program manager, the Wyoming Department of Health at 800-535-4006, or WyoCARE at 307-766-2861.

Cessation Brochures



Paycheck Stuffers



Tobacco-Free Poster

Your company cares about your health.



That's why it's going tobacco-free.
Use these free services to help you quit. Or ask your HR department for help.

I-800-QUIT-NOW
wy.quitnet.com




TOBACCOFREEWYOMING

Sponsored by the Wyoming Department of Health, Substance Abuse Division, with funds from the Wyoming Tobacco Settlement.

Fold-up Quit Card

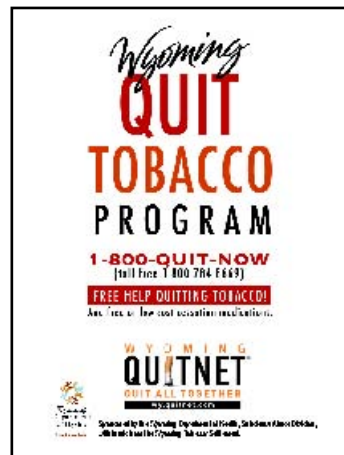
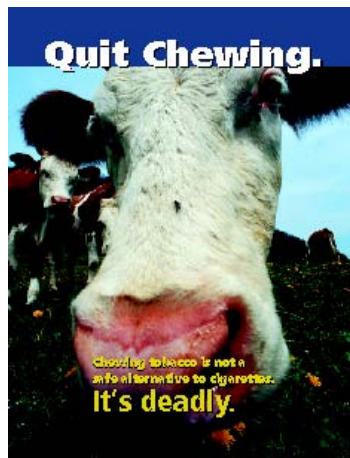


Here's How to Quit Spit:

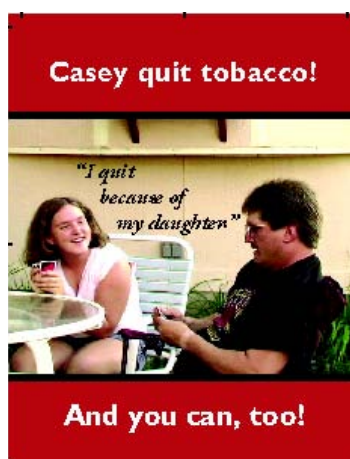
1. Set a **Stop Day**.
2. Call **1-800-QUIT-NOW** for counseling and free or low-cost medications to help you quit. Or go to wy.quitnet.com for on-line support and information.
3. Use **Nicotine Replacement Therapy (NRT)**: To improve your quit effort and decrease withdrawal symptoms, you need NRT. It's even more important if you chew than if you smoke, because chew provides more nicotine than cigarettes do.
In addition to NRT, you can use any combination of the items below (please ask your pharmacist about dosing information)
4. Use **Bupropion SR (Wellbutrin)**: Start using this prescription a week before your Stop Day and continue for 3 months or more. This will help with irritability and cravings.
5. Use **gum or lozenges**: Nicotine gum (2 mg to 4 mg) or nicotine lozenge (2 to 4 mg) can be used as needed with the patch for additional control of withdrawal symptoms and cravings.
6. Use a **replacement chew product** or chew sugarfree gum or sunflower seeds. This helps with the oral aspects of quitting chew.
7. Consult your **dentist** for an oral exam.

This will make quitting easier than the last time you tried. And remember, your life—and your face—is worth it.

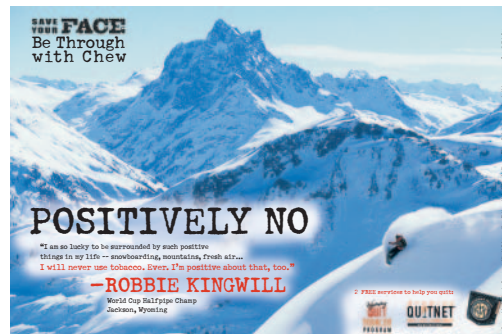
Quit Cards



A variety of pocket-size cards is available. Only a few are shown here. Cards include cessation information, and they may fit into a paycheck envelope.



Cessation Posters



KITS

Helpful kits are available for your employees to take home to help them and their families quit tobacco. To get yours, contact your local county tobacco program manager.

Quit Spit Kit



Smokefree Homes Kit



FOOTNOTES

- ¹ US Department of Health and Human Services (HHS), *Reducing Tobacco Use: A Report to the Surgeon General*, 2000. www.cdc.gov/tobacco/sgr_tobacco_use.htm. Retrieved February 21, 2007.
- ² Ferguson, Thomas, Michael Dorsom, Trent Holder. (August 2006) Worksite Wellness, WY Best Practices 2006 (WySAC Technical Report No. SRC-610). Laramie: Wyoming Survey & Analysis Center, University of Wyoming.
- ³ Fellows, J.L.; Trosclair, A.; Rivera C.C.; National Center for Chronic Disease and Prevention and Health Promotion, "Annual Smoking Attributable Mortality, Years of Potential Life Lost, and Economic Costs-United States, 1995-1999." *Morbidity and Mortality Weekly Report. JAMA*, (287)18:2335-2356, 8 May 2002, as retrieved at www.cdc.gov on August 31, 2006.
- ⁴ BRFSS (2005), US Census (2005), and SAMMEC (1998 & 2001)
- ⁵ Stewart, W.F.; Ricci, J.A.; Chee, E.; Morganstein, D. "Lost Productivity Work Time Costs From Health Conditions in the United States: Results From the American Productivity Audit." *JOEM*. 45(12): 1234-1246. December 2003.
- ⁶ Stewart, W.F.; Ricci, J.A.; Chee, E.; Morganstein, D. "Lost Productivity Work Time Costs From Health Conditions in the United States: Results From the American Productivity Audit." *JOEM*. 45(12): 1234-1246. December 2003.
- ⁷ Hébert Richard. "What's new in Nicotine & Tobacco Research?" Nicotine & Tobacco Research Volume 2, Number 4 /November, 2000 pp. 313 - 315
- ⁸ The Cost of Smoking to Business," American Cancer Society, April 13, 2000.
- ⁹ Halpern, M.T.; Shikar, R.; Rentz, A.M.; Khan, Z.M., "Impact of smoking status on workplace absenteeism and productivity," *Tobacco Control* 10(3): 233-238, September 2001.
- ¹⁰ Center for Health Promotion and Publications. *The Dollar (and sense) Benefits of Having a Smoke-Free Workplace*. Lansing, Michigan: Michigan Tobacco Control Program: 2000.
- ¹¹ (Health Canada's 1996-1997 National Population Health Survey. The Canadian Lung Association.)
- ¹² Swart, *An Overlooked Cost of Employee Smoking*, Personnel, August 1990.
- ¹³ Leading causes of non-home structure fires, annual averages, National Fire Protection Association. As retrieved on November 1, 2006 at www.nfpa.org/itemDetail.asp?categoryID=952&itemID=23311&URL=Research%20&%20 Reports/Fire%20statistics/Causes.
- ¹⁴ 11. [n.a.], "The dollars (and sense) benefits of having a smoke-free workplace," *Michigan Department of Community Health*, [2000].
- ¹⁵ Predicting smokeless tobacco cessation in a blue-collar population. Riki Pauline Weinstein, The University of Texas H.S.C. at Houston School of Public Health. Retrieved October 2006 from <http://digitalcommons.library.tmc.edu/dissertations/AAI9700057/>.

- ¹⁶ National Cancer Institute, as retrieved on 11/16/06 from www.cancer.gov/cancertopics/factsheet/Tobacco/smokeless.
- ¹⁷ Wyoming Department of Health (2006). *Wyoming Behavior Risk Factor Surveillance System*. Retrieved May 2006 from <http://wdh.state.wy.us/brfss/brfssdata.asp>.
- ¹⁸ (S.T.O.P. Guide, 1997; Hatsukami, D. & H Severson, Nicotine and Tobacco Research, 1999.)
- ¹⁹ Oregon Research Institute; Vital Statistics
- ²⁰ Wyoming Department of Health. (2006). *Wyoming Behavioral Risk Factor Surveillance System*. Retrieved May 2006 from <http://wdh.state.wy.us/brfss/brfssdata.asp>
- ²¹ (Novotny TE, Giovino GA. Tobacco use. In: Brownson RC, Remington PL, Davis JR (eds). *Chronic Disease Epidemiology and Control*. Washington, DC: American Public Health Association; 1998. p.117–148.)
- ²² (Novotny TE, Giovino GA. Tobacco use. In: Brownson RC, Remington PL, Davis JR (eds). *Chronic Disease Epidemiology and Control*. Washington, DC: American Public Health Association; 1998. p.117–148. U.S. Department of Health and Human Services. *Reducing the Health Consequences of Smoking — 25 Years of Progress: A Report of the Surgeon General*. Atlanta, GA: U.S. Department of Health and Human Services, CDC; 1989. DHHS Pub. No. (CDC) 89-8411. Accessed: February 2004. Ockene IS, Miller NH. Cigarette smoking, cardiovascular disease, and stroke: a statement for healthcare professionals from the American Heart Association. *Journal of American Health Association* 1997;96(9):3243–3247.)
- ²³ (The Health Consequences of Involuntary Exposure to Tobacco Smoke: 6 Major Conclusions of the Surgeon General Report. A Report of the Surgeon General, U.S. Department of Health and Human Services, 2006; Available at: www.surgeongeneral.gov/library/secondhandsmoke/factsheets/factsheet6.html: Accessed on 7/7/06.)
- ²⁴ Boffetta P, Agudo A, Ahrens W et al. Multicenter Case-Control Study of Exposure to Environmental Tobacco Smoke and Lung Cancer in Europe. *Journal of the National Cancer Institute* 1998; 90: 1440-1445.
- ²⁵ As retrieved from www.tobaccofreekids.org/reports/settlements/toll.php?StateID=WY on 11/16/06.
- ²⁶ www.ctri.wisc.edu/Insurers/Business.Case.Insurance.pdf; Center for Tobacco Research and Intervention, University of Wisconsin Medical School
- ²⁷ NC Prevention Partners, Buying Prevention Related Benefits: A 5-Step guide for NC Employers. Hodgson T. Cigarette smoking and lifetime medical expenditures. *The Milbank Quarterly* 1992;70 (1): 81-125. Warner, KE, Smith DG, Fries BE. Health and economic implications of a work-site smoking cessation program: a simulation analysis. *Journal of Occupational and Environmental Medicine*. 1996; 38 (10): 981-92.
- ²⁸ Adapted from *Oregon Business Toolkit*

FOR MORE INFORMATION

Wyoming Department of Health, Substance Abuse Division

Tobacco Prevention Program

Sylvia Bagdonas

Smoke-Free Environments & Initiatives

6101 Yellowstone Road, Ste 220

Cheyenne, WY 82002

307-777-3690

sbagdo@state.wy.us

<http://wdh.state.wy.us/SAD/Tobacco.asp>

Wyoming Through With Chew

Niki Sue Mueller, Program Director

Box 2631

Jackson, Wyoming 83001

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nikisue@throughwithchew.com

www.throughwithchew.com

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Business Toolkit Committee: Debbie Reid, Campbell County; Kim Pexton, Converse County; Brittany Ritter, Lincoln County; Deborah Walton, Natrona County; Sheila Smith, Sweetwater County; Candi Odde, Uinta County; Deanne Ferguson, Weston County; and Amy Russian.

Wyoming Tobacco Technical Assistance Consortium: Mike Vercauteren

Helpful links:

www.throughwithchew.com

<http://wdh.state.wy.us/main>

www.businesscaseroi.org/roi/default.aspx

<http://centralvalleyhealth.org/ToolkitBooklet.pdf>

www.tobaccofreeoregon.org/projects/miyb/index.html



Wyoming
Department
of Health

Commit to your health.

Wyoming Department of Health, Substance Abuse Division.
6101 Yellowstone Road, Suite 220 • Cheyenne, WY 82002
800-535-4006 • Fax: 307-777-5849 • <http://wdh.state.wy.us/SAD/>



www.throughwithchew.com

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